

Message

---

**From:** Calvin Willhit{ Ex. 6 Personal Privacy (PP) }  
**Sent:** 3/28/2021 6:59:29 PM  
**To:** tsujij@exponent.com; Harvey Clewell [hclewell@ramboll.com]; Cohen, Samuel M [scohen@unmc.edu]; Orme-Zavaleta, Jennifer [Orme-Zavaleta.Jennifer@epa.gov]; Lee, Janice [Lee.JaniceS@epa.gov]; Thayer, Kris [thayer.kris@epa.gov]; Bette Meek [bmeek@uottawa.ca]; Michael Dourson{ Ex. 6 Personal Privacy (PP) }  
**Subject:** Good News

As promised (and with considerable luck I might add) the initial roster of presenters/chairs for a 2022 SOT workshop on Arsenic has come together. One of the problems faced in collecting topics are the very many different adverse human health outcomes associated with excess arsenic in drinking water and - yes - even foods like rice. We cannot possibly fit in every adverse health outcome from cancers at multiple sites, to cardiovascular, diabetes and on and on. BUT most SOT members will not be aware of the many different human health consequences of chronic arsenic intoxication and the difficulty regulatory agencies have with identification of the lowest arsenic exposure that is associated with each disease. And what to do about it....

A thing to keep in mind please is that Americans are snobs and unfortunately a percentage of our audience won't care one bit about people in Taiwan or data from geographic areas other than continental USA. Just watch the US news compared to that broadcast when you visit other countries including Canada or Russia....

Elevated arsenic in drinking water is present in areas of the US and Canada no question; perhaps at concentrations for private groundwater wells that should be addressed by testing and at-the-tap treatment (e.g., individual homeowners or small systems like trailer parks)? Or Indian reservations on or near old mining areas? We could be looking at naturally-occurring or mining area As drinking water concentrations that approach those in Bangladesh or Taiwan?

If you have come across publications/government reports of endemic high As in US and Canada municipal or private well drinking water it might increase Program Committee attention to an Arsenic session. If you know of data on US or worldwide deaths connected (despite the specific disease) with chronic arsenic poisoning (perhaps total as many as US mortality from COVID??) that can be introduced to spark Program Committee interest.

On that very point, I'm thinking of using Skull & Crossbones to introduce the arsenic session to Program Committee. Why? For the very same reason I used the 007 movie Dr. No to introduce the upcoming Patty's Industrial Hygiene and Toxicology chapter on Aluminum; fun movie and I suggest you rent it. You see, Ian Fleming lived in Jamaica (he called his home 'Golden Eye') and Dr. No takes place in Ocho Rios where the evil villain's hide-out is in a bauxite mine; at the end of the movie the Reynolds Aluminum pier explodes (spectacular scene of course). Today, it is a cruise boat port with a Jimmy Buffet bar.... One must market the proposal to the Program Committee.

You will all have opportunity to edit the proposal, add/delete topics and identify

speakers. Since we've begun this project early, there is plenty of time to refine the proposal to increase chances of success. It isn't easy.

CW